Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this amended fili

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Susan First name  Elizabeth Middle name  Randall Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Susan Neroni	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5561	

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Debtor 1 Susan Elizabeth Randall

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	1653 Maylane Lane Apt 204	If Debtor 2 lives at a different address:
		Traverse City, MI 49686  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Grand Traverse County	County
		,	·
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		erogeny213@yahoo.com	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

7.	Tell the Court About Y	Your Bankruptcy Case  Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy						
	Bankruptcy Code you are choosing to file under							
	choosing to the under	☐ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		■ Chap	ter 13					
8.	How you will pay the fee	ab ord	out how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	e paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
				the fee in installments. If you in Installments (Official Forn		e this option, sign	and attach the Applica	ation for Individuals to Pay
		□ Ire	equest tha	t my fee be waived (You may uired to, waive your fee, and n	, request			
				r family size and you are una n to Have the Chapter 7 Filing				
9.	Have you filed for bankruptcy within the last 8 years?	□ No.						
		Yes.						
			District	Western District of MI	When	8/26/14	Case number	14-05629
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	
			District		When		Case number, if	known
11.	Do you rent your residence?	□ No.	Go to li	ne 12.				
	residence.	Yes.	Has yo	ur landlord obtained an eviction	on judgm	ent against you?		
				No. Go to line 12.				
				Yes. Fill out Initial Statement	About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

Debtor 1 Susan Elizabeth Randall

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Den	Susan Elizabeth F	kandali		Case number (if known)				
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Propri	etor				
			•					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	☐ Yes. Name and location of business					
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	y				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code				
	it to this petition.		Check the appropriate b	pox to describe your business:				
			☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))				
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))				
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))				
			☐ Commodity Brok	xer (as defined in 11 U.S.C. § 101(6))				
			☐ None of the abo	ve				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you indicate that you arens, cash-flow statement, and S.C. 1116(1)(B).	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of I federal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	I am not filing under Cha	apter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankr Code.					
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Par	t 4: Report if You Own or	Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?					
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own							
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
				Number, Street, City, State & Zip Code				

Debtor 1 Susan Elizabeth Randall

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Susan Elizabeth F	Randall		Case nur	mber (if known)		
Par	t 6: Answer These Quest	ions for Rep	orting Purposes				
16.	What kind of debts do you have?			onsumer debts? Consumer debts are osonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an		
		Γ	☐ No. Go to line 16b.				
		J	Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
		Γ	☐ No. Go to line 16c.				
		Γ	Yes. Go to line 17.				
		16c. S	State the type of debts you	owe that are not consumer debts or busi	iness debts		
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapte	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any exempt p vailable to distribute to unsecured credit	property is excluded and administrative expenses ors?		
	administrative expenses	[	□No				
	are paid that funds will be available for distribution to unsecured	[	Yes				
	creditors?						
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	<b>1</b> 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 10,001-25,000	50,001-100,000		
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	<b>S</b> \$0 - \$50	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		· \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>—</b> \$500,00	1 - \$1 million	<b>—</b> \$100,000,001 \$000 Hillion			
Par	t 7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
			attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ment, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
I request relief in accordance with the chapter of title 11, United States				chapter of title 11, United States Code,	specified in this petition.		
and 3571.					ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			zabeth Randall	Signature of De	obtor 2		
		Executed of	September 19, 2019		MM / DD / YYYY		
			ואוואו / טט / וואוואו		IVIIVI / DD / TTTT		

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Debtor 1 Susan Elizabeth I	Randall	Case	e number (if known)	
For your attorney, if you are represented by one  I, the attorney for the debtor(s) named in this petitic under Chapter 7, 11, 12, or 13 of title 11, United State for which the person is eligible. I also certify that I I and, in a case in which § 707(b)(4)(D) applies, certification.		ites Code, and have enave delivered to the d	xplained the relief a lebtor(s) the notice r	vailable under each chapter required by 11 U.S.C. § 342(b)
an attorney, you do not need to file this page.	schedules filed with the petition is incorrect.  /s/ Carroll Clough	Date	September 19,	,

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill	l in this inform	nation to identify you	r case:			
De	btor 1	Susan Elizabeth	Randall  Middle Name	Last Name		
De	btor 2	i iist waine	Middle Name	Lastivanie		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF	MICHIGAN		
Ca	se number					
(if k	nown)					Check if this is an
						amended filing
$\bigcap$	ficial For	m 107				
			Affairs for Individ	uals Eiling for F	Pankruntov	4/1:
info	rmation. If me	ore space is needed	ible. If two married people ar , attach a separate sheet to tl			
nun	nber (if known	ı). Answer every que	stion.			
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	us?			
	☐ Married					
	■ Not marr	ried				
2.	During the la	st 3 vears, have vou	lived anywhere other than w	here you live now?		
	_	, , , , , , ,	, , , , , , , , , , , , , , , , , , , ,			
	□ No ■ Yes List	t all of the places you	lived in the last 3 years. Do not	t include where you live no	N	
		, ,	,	,		
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	1259 N Key	•	From-To:	☐ Same as Debtor	1	Same as Debtor 1
	Traverse C	City, MI 49696	one year in 201	17		From-To:
	2395 Amel	ia Ave	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1
	Kingsley, I	MI 49649	a few years			From-To:
			before Keystor Rd	ie		
3. stat			ver live with a spouse or lega difornia, Idaho, Louisiana, Neva			
	_					,
	■ No □ Yes Ma	ke sure vou fill out Sc	hedule H: Your Codebtors (Off	icial Form 106H)		
		ne sare you mi out oo	Toda Codebiora (Offi	iolari omi roomj.		
Pa	rt 2 Explain	n the Sources of You	ır Income			
4.			mployment or from operating			calendar years?
			ou received from all jobs and al have income that you receive			
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Del	otor 1 S	usan Elizal	beth Randa	II		Cas	e number (if known)		
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		ry 1 of curre ı filed for baı		■ Wages, commissions, bonuses, tips		\$17,753.29	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
		endar year: o December	31, 2018 )	■ Wages, commissions, bonuses, tips		\$21,280.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
		ndar year be o December		■ Wages, commissions, bonuses, tips		\$24,154.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
	□ No	s source and t	Ü	ome from each source separa	пеіу. Do	not include income t	ŕ	e 4.	
		s. Fill in the de	etails.	Debtor 1 Sources of income	Gro	ss income from	Debtor 2 Sources of inc	ome	Gross income
				Describe below.	(befo	n source ore deductions and usions)	Describe below		(before deductions and exclusions)
		endar year: o December	31, 2018 )	funds from friend to move		\$1,600.00			
De	4 2 ·	at Cantain Da	www.anto.Vo	Made Defere Very Filed for	Danker				
6.		er Debtor 1's Neither D	or Debtor 2 ebtor 1 nor D	Made Before You Filed for 's debts primarily consume Debtor 2 has primarily consu- personal, family, or househo	r debts umer de	? ebts. Consumer debi	s are defined in 11	U.S.C. § 10 <sup>-</sup>	1(8) as "incurred by an
		During the No.	90 days befo	ore you filed for bankruptcy, di	id you p	ay any creditor a tota	ıl of \$6,825* or moı	re?	
		☐ Yes	paid that cr	each creditor to whom you pai editor. Do not include paymer payments to an attorney for t	nts for d	omestic support obliq			
		* Subject		t on 4/01/22 and every 3 year			or after the date o	f adjustment.	
	■ Yes			or both have primarily consure you filed for bankruptcy, di			al of \$600 or more?		
		■ No.	Go to line 7						
		□ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.					
	Credito	r's Name an	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for

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Case number (if known)

Within 1 year before you filed for bankr Insiders include your relatives; any genera of which you are an officer, director, perso a business you operate as a sole proprieto alimony.	al partners; relatives of any gen on in control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a genera iny managing a	I partner; corporation gent, including one fo
No					
☐ Yes. List all payments to an insider.  Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
	Dates of paymont	paid	still owe		c paye
Within 1 year before you filed for bankr insider? Include payments on debts guaranteed or		yments or transfer a	any property on a	eccount of a de	ebt that benefited an
■ No					
<ul><li>No</li><li>Yes. List all payments to an insider</li></ul>					
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Identificational Actions Democracy	siana and Fancalasumas	<b>P</b>			
art 4: Identify Legal Actions, Reposses	sions, and Foreciosures				
Within 1 year before you filed for bankr List all such matters, including personal in modifications, and contract disputes.					
<ul><li>☑ No</li><li>☑ Yes. Fill in the details.</li></ul>					
Case title	Nature of the case	Court or agency		Status of th	e case
Case number	Nature of the sase	oourt or agency		Otatas or tir	o dude
Munson Healthcare vs Susan Elizabeth Randall 18-6958 GC1	Collection	86th District Co 280 Washingto Suite 114C Traverse City,	on Street	☐ Pending ☐ On appe ☐ Conclude	
. Within 1 year before you filed for bankr Check all that apply and fill in the details b		perty repossessed, f	oreclosed, garni	shed, attached	l, seized, or levied?
☐ No. Go to line 11.					
Yes. Fill in the information below.					
Creditor Name and Address	Describe the Property		Date		Value of the
	Explain what happene	ed			property
Chrysler Finanical PO Box 9223	2013 Ford Focus		Nov	of 2018	\$8,000.00
Farmington Hills, MI 48333-9223	<ul><li>■ Property was reposs</li><li>□ Property was foreclo</li><li>□ Property was garnish</li></ul>	sed.			
	☐ Property was attached	ed, seized or levied.			
. Within 90 days before you filed for bank accounts or refuse to make a payment  No Yes. Fill in the details.		cluding a bank or fil	nancial institutio	n, set off any a	mounts from your
☐ Yes. Fill in the details.  Creditor Name and Address	Describe the action th	e creditor took	Data	action was	Amount
Greunor Maine and Address	pescribe the action th	e creditor took	takei		Amount

Debtor 1 Susan Elizabeth Randall

Case number (if known)

2.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o	ptcy, was any of your property in the possession of a ranother official?	n assignee for the bene	fit of creditors, a
	■ No			
	□ Yes			
Par	t 5: List Certain Gifts and Contribution	6		
rai	List Certain Girts and Contribution	5		
13.	_ '	uptcy, did you give any gifts with a total value of more	e than \$600 per person?	•
	■ No □ Yes. Fill in the details for each dift.			
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$6	Describe the gifts	Dotos vou govo	Value
	per person	Describe the gifts	Dates you gave the gifts	value
	Person to Whom You Gave the Gift and Address:			
14	Within 2 years before you filed for bank	uptcy, did you give any gifts or contributions with a to	otal value of more than 9	\$600 to any charity?
	■ No	aproy, and you give any give or contributions with a w		to any onany .
	☐ Yes. Fill in the details for each gift or o	ontribution.		
	Gifts or contributions to charities that more than \$600 Charity's Name	otal Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Cod	e)		
Par	t 6: List Certain Losses			
5.	or gambling?	ptcy or since you filed for bankruptcy, did you lose ar	nything because of them	t, fire, other disaster,
	☐ Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Dor	List Contain Boumonts on Transfer	•		
Par	t 7: List Certain Payments or Transfer	<b>S</b>		
16.	consulted about seeking bankruptcy or	ptcy, did you or anyone else acting on your behalf pa preparing a bankruptcy petition? preparers, or credit counseling agencies for services requi		ty to anyone you
	■ No			
	☐ Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address	transferred	or transfer was made	payment
	Person Who Made the Payment, if Not	ou ou	made	
17.		ptcy, did you or anyone else acting on your behalf paditors or to make payments to your creditors?  you listed on line 16.	y or transfer any proper	ty to anyone who
	■ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was	Amount of payment
			made	1,

Debtor 1 Susan Elizabeth Randall

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.								
	Person Who Received Transfer Address  Person's relationship to you	Description and v property transferr			y property or eceived or debts nange	Date transfer was made			
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details.		y property to a se	elf-settled trus	t or similar device o	of which you are a			
	Name of trust	Description and v	alue of the prope	rty transferred	1	Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stor	age Units					
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association of the solution of th	other financial accour	nts; certificates o	-	•				
		Last 4 digits of Type of account account number instrument		unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 ye cash, or other valuables?  No Yes. Fill in the details.	ar before you filed for	bankruptcy, any	safe deposit k	oox or other deposi	cory for securities,			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the co	ontents	Do you still have it?			
22.	Have you stored property in a storage unit or  ■ No □ Yes. Fill in the details.	place other than your	home within 1 ye	ear before you	filed for bankruptc	y?			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the co	ontents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that som for someone.  No Yes. Fill in the details.	eone else owns? Inclu	ude any property	you borrowed	from, are storing fo	or, or hold in trust			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the pr	operty	Value			
Par	t 10: Give Details About Environmental Infor	•							
For	the purpose of Part 10, the following definition	ns apply:							

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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#### Debtor 1 Susan Elizabeth Randall

Case number (if known)

		substances, wastes, or material into t tions controlling the cleanup of these			dwa	ter, or other medium, including st	atutes or				
	regulations controlling the cleanup of these substances, wastes, or material.  Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,										
Rep	ort all ı	notices, releases, and proceedings th	hat yo	ou know about, regardless of wher	n the	ey occurred.					
24.	Has a	ny governmental unit notified you tha	at you	ı may be liable or potentially liable	unc	der or in violation of an environme	ental law?				
	■ N	lo									
	_	es. Fill in the details.									
		e of site ess (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Have y	you notified any governmental unit of	of any	release of hazardous material?							
	_	lo									
		es. Fill in the details.		Covernmental unit		Fundamental law if you	Date of notice				
		e of site ess (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
26.	Have y	you been a party in any judicial or ad	lminis	strative proceeding under any envi	ironi	mental law? Include settlements a	and orders.				
	■ No										
		es. Fill in the details.									
	Case Case	Title Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
Par	t 11:	Give Details About Your Business or	r Con	,							
27.	Within	1 4 vears before you filed for bankrup	otcv. c	did vou own a business or have an	ıv of	f the following connections to any	business?				
	_	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)										
	☐ A partner in a partnership										
	☐ An officer, director, or managing executive of a corporation										
	☐ An owner of at least 5% of the voting or equity securities of a corporation										
	No. None of the above applies. Go to Part 12.										
	_	es. Check all that apply above and fil									
		ness Name		scribe the nature of the business	<b>.</b>	Employer Identification number	,				
	Addre (Number	ess er, Street, City, State and ZIP Code)	Na	me of accountant or bookkeeper		Do not include Social Security					
		, , <b>,</b> ,	IVA	me of accountant of bookkeeper		Dates business existed					
28.		n 2 years before you filed for bankrup ttions, creditors, or other parties.	otcy, c	did you give a financial statement	to aı	nyone about your business? Inclu	ide all financial				
	■ N	lo									
	□ Y	es. Fill in the details below.									
	Name		Da	te Issued							
		er, Street, City, State and ZIP Code)									

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Debtor 1 Susan Elizabeth Randall			Case number (if known)
Part 12	2: Sign Below		
are true	e and correct. I understand that maki		ts, and I declare under penalty of perjury that the answers erty, or obtaining money or property by fraud in connection to 20 years, or both.
/s/ Su	san Elizabeth Randall		
	n Elizabeth Randall cure of Debtor 1	Signature of Debtor 2	
Date	September 19, 2019	Date	
Did you	ı attach additional pages to Your Sta	tement of Financial Affairs for Individu	uals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you ■ No	ı pay or agree to pay someone who i	s not an attorney to help you fill out ba	nkruptcy forms?
☐ Yes.	Name of Person Attach the Ba	ankruptcy Petition Preparer's Notice, Dec	laration, and Signature (Official Form 119).

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Debtor 1  Debtor 2 (Spouse, if filing)  United States Bankru  Case number  Official Form  Schedule In each category, separathink it fits best. Be as information. If more spenser every question  Part 1: Describe Each  No. Go to Part 2.  Yes. Where is the part 2: Describe You  Do you own, lease, of someone else drives.  Cars, vans, trucked  No  Yes  3.1 Make: Toy	A/B: Propert rately list and describe items complete and accurate as p ace is needed, attach a sepa h. h Residence, Building, Land e any legal or equitable interes e property?  Ir Vehicles or have legal or equitable	Middle Name  Middle Name  TERN DISTRICT OF MI  S. List an asset only once. ossible. If two married perate sheet to this form. Or on Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule Greport it on Schedul	If an asset fits in more than copple are filing together, both and the top of any additional pag	are equally responsible for ges, write your name and ca	supplying correct ase number (if known).
Debtor 2 (Spouse, if filing)  United States Bankru  Case number  Official Form  Schedule In each category, separathink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the someone else drives.  3. Cars, vans, trucks  No Yes  3.1 Make: Toy	First Name  First Name  uptcy Court for the: WES  A/B: Propert  rately list and describe items accomplete and accurate as pace is needed, attach a sepand.  h Residence, Building, Land e any legal or equitable interes a property?  In Vehicles  or have legal or equitable If you lease a vehicle, also	Middle Name  Middle Name  TERN DISTRICT OF MI  S. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build a interest in any vehicle or report it on Schedule Greport it on Sched	Last Name CHIGAN  If an asset fits in more than of opple are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	amended filing  12/15  in the category where you supplying correct ase number (if known).
Debtor 2 (Spouse, if filing)  United States Bankru  Case number  Official Form  Schedule In each category, separathink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the someone else drives.  3. Cars, vans, trucks  No Yes  3.1 Make: Toy	n 106A/B A/B: Propert  rately list and describe items accomplete and accurate as place is needed, attach a sepal.  h Residence, Building, Land any legal or equitable interest property?  r Vehicles  or have legal or equitable. If you lease a vehicle, also	Middle Name  TERN DISTRICT OF MI  S. List an asset only once. ossible. If two married perate sheet to this form. On , or Other Real Estate You est in any residence, build interest in any vehicle oreport it on Schedule G	Last Name CHIGAN  If an asset fits in more than of opple are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	amended filing  12/15  in the category where you supplying correct ase number (if known).
United States Bankru Case number  Official Form Schedule In each category, sepanthink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each 1. Do you own or have  No. Go to Part 2.  Yes. Where is the  Part 2: Describe You  Do you own, lease, of someone else drives.  3. Cars, vans, trucks  No Yes  3.1 Make: Toy	n 106A/B  A/B: Propert  rately list and describe items of complete and accurate as place is needed, attach a sepand.  The Residence, Building, Land et any legal or equitable interest approperty?  The Vehicles  or have legal or equitable if you lease a vehicle, also	Y S. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule G	If an asset fits in more than copple are filing together, both an the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	amended filing  12/15  in the category where you supplying correct ase number (if known).
Case number  Official Form Schedule In each category, separathink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the  Part 2: Describe You  Do you own, lease, or someone else drives.  3. Cars, vans, trucks  No  Yes  3.1 Make: Toy	A/B: Propert  rately list and describe items complete and accurate as p ace is needed, attach a sepa  h.  h Residence, Building, Land e any legal or equitable interes  property?  Trychicles  or have legal or equitable If you lease a vehicle, also	S. List an asset only once. ossible. If two married perate sheet to this form. On , or Other Real Estate You est in any residence, build interest in any vehicle oreport it on Schedule G	If an asset fits in more than of ople are filing together, both an the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	amended filing  12/15  in the category where you supplying correct ase number (if known).
Official Form Schedule In each category, separathink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the Part 2: Describe You  Do you own, lease, or someone else drives.  3. Cars, vans, trucks  No  Yes  3.1 Make: Toy	A/B: Propert rately list and describe items complete and accurate as p ace is needed, attach a sepa h.  h Residence, Building, Land e any legal or equitable interes e property?  Tr Vehicles  or have legal or equitable If you lease a vehicle, also	s. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule Gregory it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or sets i	ople are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	amended filing  12/15  in the category where you supplying correct ase number (if known).
Official Form Schedule In each category, separthink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the someone else drives.  3. Cars, vans, trucks  No  Yes  3.1 Make: Toy	A/B: Propert rately list and describe items complete and accurate as p ace is needed, attach a sepa h.  h Residence, Building, Land e any legal or equitable interes e property?  Tr Vehicles  or have legal or equitable If you lease a vehicle, also	s. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule Gregory it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or sets i	ople are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	amended filing  12/15  in the category where you supplying correct ase number (if known).
In each category, separithink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the part 2: Describe You  Do you own, lease, or someone else drives.  3. Cars, vans, trucks  No  Yes  3.1 Make: Toy	A/B: Propert rately list and describe items complete and accurate as p ace is needed, attach a sepa h.  h Residence, Building, Land e any legal or equitable interes e property?  Tr Vehicles  or have legal or equitable If you lease a vehicle, also	s. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule Gregory it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or sets i	ople are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	in the category where you supplying correct ase number (if known).
In each category, separathink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the someone else drives.  Do you own, lease, of someone else drives.  Cars, vans, trucks  No  Yes  1. No  Yes  1. Answer every question  Part 2: Describe You  Part 2: Describe You  Do you own, lease, of someone else drives.  3. Cars, vans, trucks  Toy	A/B: Propert rately list and describe items complete and accurate as p ace is needed, attach a sepa h.  h Residence, Building, Land e any legal or equitable interes e property?  Tr Vehicles  or have legal or equitable If you lease a vehicle, also	s. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule Gregory it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or sets i	ople are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	in the category where you supplying correct ase number (if known).
In each category, separathink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the someone else drives.  Do you own, lease, of someone else drives.  Cars, vans, trucks  No  Yes  1. No  Yes  1. Answer every question  Part 2: Describe You  Part 2: Describe You  Do you own, lease, of someone else drives.  3. Cars, vans, trucks  Toy	A/B: Propert rately list and describe items complete and accurate as p ace is needed, attach a sepa h.  h Residence, Building, Land e any legal or equitable interes e property?  Tr Vehicles  or have legal or equitable If you lease a vehicle, also	s. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule Gregory it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or sets i	ople are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	in the category where you supplying correct ase number (if known).
In each category, separithink it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the part 2: Describe You  Do you own, lease, or someone else drives.  3. Cars, vans, trucks  No  Yes  3.1 Make: Toy	rately list and describe items complete and accurate as place is needed, attach a sepal.  h Residence, Building, Land e any legal or equitable interest property?  T Vehicles  or have legal or equitable, also	s. List an asset only once. ossible. If two married perate sheet to this form. On or Other Real Estate You est in any residence, build interest in any vehicle or report it on Schedule Gregory it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or report it on Schedule Gregory in the or set of two sets in any vehicle or sets i	ople are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	in the category where you supplying correct ase number (if known).
think it fits best. Be as information. If more sp Answer every question  Part 1: Describe Each  1. Do you own or have  No. Go to Part 2.  Yes. Where is the part 2: Describe You  Do you own, lease, of someone else drives.  3. Cars, vans, trucks  No  Yes  3.1 Make: Toy	complete and accurate as pace is needed, attach a sepand.  h Residence, Building, Land e any legal or equitable interes e property?  r Vehicles  or have legal or equitable, also	ossible. If two married perate sheet to this form. On one of the control of two control of the c	ople are filing together, both and the top of any additional page.  Own or Have an Interest In ing, land, or similar property?	are equally responsible for ges, write your name and ca	supplying correct ase number (if known).
1. Do you own or have  No. Go to Part 2.  Yes. Where is the  Part 2: Describe You  Do you own, lease, of someone else drives.  Cars, vans, trucks  No  Yes  3.1 Make: Toy	e any legal or equitable interests or vehicles or have legal or equitable If you lease a vehicle, also	est in any residence, build  interest in any vehicle o report it on Schedule G	ing, land, or similar property?	ered or not? Include any	vehicles you own that
No. Go to Part 2.  Yes. Where is the Part 2: Describe You  Do you own, lease, of someone else drives.  Cars, vans, trucks  No  Yes  3.1 Make: Toy	e property?  Ir Vehicles  or have legal or equitable  If you lease a vehicle, also	interest in any vehicle preport it on Schedule G	s, whether they are registe	ered or not? Include any	vehicles you own that
No. Go to Part 2.  Yes. Where is the Part 2: Describe You  Do you own, lease, of someone else drives.  Cars, vans, trucks  No  Yes  3.1 Make: Toy	e property?  Ir Vehicles  or have legal or equitable  If you lease a vehicle, also	interest in any vehicle preport it on Schedule G	s, whether they are registe	ered or not? Include any	vehicles you own that
Part 2: Describe You  Do you own, lease, osomeone else drives.  3. Cars, vans, trucks  No Yes  3.1 Make: Toy	or have legal or equitable If you lease a vehicle, also	report it on Schedule G			vehicles you own that
Part 2: Describe You  Do you own, lease, o someone else drives.  3. Cars, vans, trucks  □ No ■ Yes  3.1 Make: Toy	or have legal or equitable If you lease a vehicle, also	report it on Schedule G			vehicles you own that
Do you own, lease, of someone else drives.  3. Cars, vans, trucks  No Yes  3.1 Make: Toy	or have legal or equitable If you lease a vehicle, also	report it on Schedule G			vehicles you own that
Do you own, lease, of someone else drives.  3. Cars, vans, trucks  No Yes  3.1 Make: Toy	or have legal or equitable If you lease a vehicle, also	report it on Schedule G			vehicles you own that
someone else drives.  3. Cars, vans, trucks  No Yes  3.1 Make: Toy	If you lease a vehicle, also	report it on Schedule G			vehicles you own that
0					
Model: Cor	/ota	Who has an interest in	n the property? Check one		claims or exemptions. Put
	rolla	■ Debtor 1 only			ured claims on Schedule D: Claims Secured by Property.
Year: <b>200</b>		Debtor 2 only		Current value of the	Current value of the
Approximate mi		Debtor 1 and Debto		entire property?	portion you own?
Other information: 16	653 Maylane Lane	☐ At least one of the c	lebtors and another		
	overse City MI 49686	Check if this is con (see instructions)	mmunity property	\$4,500.00	\$4,500.00
Examples: Boats, t  No Yes  Add the dollar va pages you have a	railers, motors, personal water water was a second was a second water water was a second	atercraft, fishing vessels vn for all of your entrie that number here	ehicles, other vehicles, an, snowmobiles, motorcycle a s from Part 2, including ar lowing items?	accessories	\$4,500.00  Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

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De	ebtor 1	Susan Elizabe	th Randall	Case number	(if known)
6.		old goods and fur les: Major appliance	nishings es, furniture, linens, china, kitchenware		
	Yes.	Describe			
		Г	All household goods are in Debtor's	nossossion and no one item	1
			is valued over \$600.00.	possession and no one item	\$1,000.00
7.	□ No	les: Televisions and	l radios; audio, video, stereo, and digital equ hones, cameras, media players, games	ipment; computers, printers, scanner	s; music collections; electronic devices
	■ res.	_	Apple notebook		\$250.00
8.			gurines; paintings, prints, or other artwork; bos, memorabilia, collectibles	ooks, pictures, or other art objects; st	amp, coin, or baseball card collections;
	_	Describe			
9.		ent for sports and les: Sports, photogr musical instrum	aphic, exercise, and other hobby equipment	; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
		Describe			
		Г			\$50.00
			camping equipment		
10.	■ No		shotguns, ammunition, and related equipme	nt	
11.	Clothe	es			
	Examµ □ No	ples: Everyday cloth	nes, furs, leather coats, designer wear, shoe	s, accessories	
		Describe			
		_			1
			clothing		\$150.00
12.	□ No		elry, costume jewelry, engagement rings, we	dding rings, heirloom jewelry, watche	s, gems, gold, silver
		Г	miscellaneous jewelry \$500; mom's v	wedding ring \$175	\$675.00
		L		J J ,	<u> </u>
13.	Examp ☐ No	irm animals ples: Dogs, cats, bir Describe	rds, horses		
	- 163.	_			-
			two small dogs		\$0.00

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Susan Elizabeth	Kanuali	Case number (if known)	
☐ Yes	. Give specific informat	ion		
		of your entries from Part 3, er here	including any entries for pages you have attached	\$2,125.00
Part 4: D	escribe Your Financial As	ssets		
Do you o	own or have any legal o	or equitable interest in any o	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	nples: Money you have i	n your wallet, in your home, ii	n a safe deposit box, and on hand when you file your petitio	on
			certificates of deposit; shares in credit unions, brokerage h the same institution, list each.	ouses, and other similar
_	s		Institution name:	
	17	.1. checking	Fifth Third bank	\$20.00
Exam ■ No □ Yes  9. Non-p joint	·	tment accounts with brokeraç Institution or issuer name	ge firms, money market accounts : d and unincorporated businesses, including an interest	in an LLC, partnership, and
Exam  No  Yes  Non-p joint  No	nples: Bond funds, inves  bublicly traded stock a venture  Give specific informat	tment accounts with brokeraç Institution or issuer name	:	in an LLC, partnership, and
Exam  No  Yes  9. Non-p joint  No  Yes  10. Gover  Nego Non-i  No	nples: Bond funds, investigations in the state of the sta	Institution or issuer name  Institution or issuer name  Ind interests in incorporated  ion about them  Name of entity:  bonds and other negotiable de personal checks, cashiers' are those you cannot transfer	: d and unincorporated businesses, including an interest	in an LLC, partnership, an
Exam  No  Yes  19. Non-p joint  No  Yes  20. Gover  Nego Non-n  No	nples: Bond funds, investigations in the stock a venture  a. Give specific information in the stock in the st	Institution or issuer name  Institution or issuer name  Ind interests in incorporated  ion about them  Name of entity:  bonds and other negotiable de personal checks, cashiers' are those you cannot transfer	d and unincorporated businesses, including an interest % of ownership: e and non-negotiable instruments checks, promissory notes, and money orders.	in an LLC, partnership, and
Exam  No Yes  9. Non-pioint  No Yes  20. Gover Nego Non-n  No Yes	publicly traded stock a venture  Give specific informate instruments including the properties of the p	Institution or issuer name  Institution or issuer name  Ind interests in incorporated  India incorporated	d and unincorporated businesses, including an interest % of ownership: e and non-negotiable instruments checks, promissory notes, and money orders.	
Exam  No Yes  9. Non-pioint  No Yes  20. Gover Nego Non-n  No Yes	publicly traded stock a venture  Grown specific information in the stable instruments including a specific information in the specific in the	Institution or issuer name  Institution or issuer name  Ind interests in incorporated  India incorporated	d and unincorporated businesses, including an interest % of ownership: and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
Exam  No Yes  19. Non-pioint  No Yes  20. Gover Negon Non-n  No Yes  21. Retire Exam No	publicly traded stock a venture  i. Give specific informate trament and corporate of table instruments including a specific information of the	Institution or issuer name  Institution or issuer name  Ind interests in incorporated  Indinate	d and unincorporated businesses, including an interest % of ownership: and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.  thrift savings accounts, or other pension or profit-sharing p	
Exam  No Yes  19. Non-pioint  No Yes  20. Gover Negon Non-n  No Yes  21. Retire Exam No	publicly traded stock a venture  a. Give specific informate transport and corporate obtable instruments including of the specific information	Institution or issuer name  Institution or issuer name  Ind interests in incorporated  In about them	d and unincorporated businesses, including an interest % of ownership: a and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.  thrift savings accounts, or other pension or profit-sharing profit institution name:	olans

☐ No

Case:19-03958-jwb Doc #:1 Filed: 09/19/2019 Page 22 of 46 Debtor 1 Susan Elizabeth Randall Case number (if known) Institution name or individual: Yes. ..... Security deposit for lease for apartment, Oak \$750.00 security deposit **Park Apartments** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value:

#### 32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information...

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Debt	or 1 Susan Elizabeth Randall		Case number (if known)	
	laims against third parties, whether or not you have filed a la Examples: Accidents, employment disputes, insurance claims, or the same control of the same control o		and for payment	
	No			
ш	Yes. Describe each claim			
	ther contingent and unliquidated claims of every nature, incl No	uding counterclaims	of the debtor and rights to set of	f claims
	Yes. Describe each claim			
	Γ <del>-</del> · · · · · · · · · · · · · · · · · · ·			
	Debtor has a mesh inp Class action law suit	plant and was award	ded funds from the	\$0.00
35. <b>A</b>	ny financial assets you did not already list			
	No			
	Yes. Give specific information			
	Add the dollar value of all of your entries from Part 4, includi			\$52,618.58
Part s	Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	ate in Part 1.	
37 <b>D</b> (	you own or have any legal or equitable interest in any business-rela	ted property?		
	No. Go to Part 6.	tou proporty .		
	/es. Go to line 38.			
_	ou. Go to line ou.			
Part (	Describe Any Farm- and Commercial Fishing-Related Property You lf you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	st In.	
46. <b>D</b>	o you own or have any legal or equitable interest in any farm	- or commercial fishin	ng-related property?	
I	No. Go to Part 7.			
I	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	o you have other property of any kind you did not already list	1?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	nat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
	Part 2: Total vehicles, line 5	\$4,500.00	_	40.00
57.	Part 3: Total personal and household items, line 15	\$2,125.00		
	Part 4: Total financial assets, line 36	\$52,618.58		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$59,243.58	Copy personal property total	\$59,243.58
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$59,243.58

Official Form 106A/B Schedule A/B: Property page 5

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			-				
Fi	ll in this inforr	nation to identify your case:					
De	ebtor 1	Susan Elizabeth Randa	II				
		First Name	Middle Name	L	Last Name		
1 '	ebtor 2 oouse if, filing)	First Name	Middle Name	L	_ast Name		
Ur	nited States Ba	nkruptcy Court for the: WES	TERN DISTRICT OF M	IICHI	GAN		
Ca	ase number						
(if I	known)					☐ Check if this is an amended filing	
$\cap$	fficial Fo	rm 106C				_	
		e C: The Prope	rty You Cla	im	as Exempt	4/19	
the nee cas	property you li eded, fill out an se number (if kr	sted on Schedule A/B: Property d attach to this page as many conown).	r (Official Form 106A/B) opies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and	
spe any fun exe	ecific dollar ar y applicable st ids—may be u emption to a p	nount as exempt. Alternatively atutory limit. Some exemption Inlimited in dollar amount. Ho	y, you may claim the f ns—such as those for wever, if you claim an	ull fa heal exer	th aids, rights to receive certain by mption of 100% of fair market valu	ing exempted up to the amount of penefits, and tax-exempt retirement	
Pa	rt 1: Identi	fy the Property You Claim as I	Exempt				
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if vo	our spouse is filing with vou.		
	_	aiming state and federal nonbar	•	•	, ,		
	_	aiming federal exemptions. 11	. , ,		(-)(-)		
2			• ( )( )	mnt	fill in the information below		
۷.		perty you list on Schedule A/E	•			Specific laws that allow examption	
		on of the property and line on that lists this property	Current value of the portion you own	AM	ount of the exemption you claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B				
		a Corolla 127,000 miles 653 Maylane Lane Apt	\$4,500.00		\$4,000.00	11 U.S.C. § 522(d)(2)	
	204, Traver	rse City MI 49686 hedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
		a Corolla 127,000 miles 653 Maylane Lane Apt	\$4,500.00		\$500.00	11 U.S.C. § 522(d)(5)	
	204, Traver	rse City MI 49686 hedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
		old goods are in Debtor's	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)	
	valued ove	n and no one item is r \$600.00. hedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit		
	Apple note		<b>*</b> 050.00			11 U.S.C. § 522(d)(3)	
		hedule A/B: <b>7.1</b>	\$250.00		\$250.00		
					100% of fair market value, up to		

camping equipment

Line from Schedule A/B: 9.1

\$50.00

11 U.S.C. § 522(d)(5)

\$50.00

100% of fair market value, up to any applicable statutory limit

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	clothing Line from Schedule A/B: 11.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)
	Line IIIIII Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
	miscellaneous jewelry \$500; mom's wedding ring \$175	\$675.00		\$675.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	checking: Fifth Third bank Line from Schedule A/B: 17.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	Ellie IIolii ooliloodie 702. TTT			100% of fair market value, up to any applicable statutory limit	
	457 retirement plan: City of Ludington 457 plan	\$37,681.82		\$37,681.82	11 U.S.C. § 522(d)(12)
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
	IRA: American Funds Capital Group	\$14,166.76		\$14,166.76	11 U.S.C. § 522(d)(12)
	Line from Schedule A/B: 21.3			100% of fair market value, up to any applicable statutory limit	
	security deposit: Security deposit for lease for apartment, Oak Park	\$750.00		\$750.00	11 U.S.C. § 522(d)(5)
	Apartments Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3			led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No □ Yes				

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Fill in this infor					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MICHIGAN		
Case number (if known)					☐ Check if this is an
					amended filing

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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		0430.13 0	OOOO JWD	D00 11.1	i iica. oo	11312013 Tag	0 27 01 40	
Fill ir	this inform	ation to identify your o	case:					
Debto	or 1	Susan Elizabeth F	Pandall					
Dobit	J1 1	First Name	Middle Na	ame	Last Name			
Debto								
(Spous	e if, filing)	First Name	Middle Na	ame	Last Name			
Unite	d States Ban	kruptcy Court for the:	WESTERN	DISTRICT OF MI	CHIGAN			
Case (if know	number			_				heck if this is an mended filing
Sch		F: Creditors W				Part 2 for creditors with	NONPRIORITY claii	12/15 ms. List the other party to
Sched Sched left. At	ule G: Executo ule D: Credito tach the Conti and case num	acts or unexpired leases ory Contracts and Unexpirs Who Have Claims Section inuation Page to this pag ber (if known).	ired Leases (Of ured by Proper e. If you have r	ficial Form 106G). ty. If more space is no information to r	Do not include s needed, copy	any creditors with partia	ally secured claims out, number the ent	that are listed in tries in the boxes on the
Part '		of Your PRIORITY Un						
_	_	s have priority unsecured	d claims agains	st you?				
	No. Go to Pa	rt 2.						
	Yes.							
Part 2	2: List All	of Your NONPRIORIT	Y Unsecured	Claims				
		s have nonpriority unsec						
_	•	e nothing to report in this pa	_	•	b your other ach	adulaa		
_	Yes.	e nothing to report in this pa	art. Submit tills i	om to the court wit	ir your other some	edules.		
ur th	nsecured claim	nonpriority unsecured cla , list the creditor separately r holds a particular claim, li	for each claim.	For each claim liste	ed, identify what t	type of claim it is. Do not li	st claims already inc	luded in Part 1. If more
								Total claim
4.1		nt Hospital		Last 4 digits of ac	count number	Randall		\$2,197.26
	28050 Ğı	Creditor's Name rand River Ave		When was the del	bt incurred?	2017		_
		ton, MI 48336 eet City State Zip Code		As of the date voi	u file. the claim i	is: Check all that apply		
		red the debt? Check one.		7.0 0 шило уст	,	or or occur an anat apply		
	■ Debtor 1	l only		☐ Contingent				
	Debtor 2	2 only		Unliquidated				
	_	I and Debtor 2 only		☐ Disputed				
	☐ At least	one of the debtors and and	ther	Type of NONPRIO	RITY unsecured	d claim:		
	☐ Check i	f this claim is for a comm	nunity	☐ Student loans				
	debt	n subject to offset?	-	☐ Obligations aris	•	aration agreement or divor	ce that you did not	
	■ No			☐ Debts to pension	on or profit-sharin	ng plans, and other similar	debts	
	☐ Yes			Other. Specify	Medical Se	rvices		_

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Debto	Susan Elizabeth Randall	Case number (if known)							
4.2	Chrysler Capital	Last 4 digits of account number	\$6,086.58						
	Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 961278	When was the debt incurred? 2018							
	Fort Worth, TX 76161-1278  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	■ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts							
	Yes	■ Other. Specify deficiency balance for returned vehicle							
4.3	Grand Traverse Pathology  Nonpriority Creditor's Name	Last 4 digits of account number 2493	\$237.00						
	1105 6th Street Traverse City, MI 49684	When was the debt incurred? 2018							
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply							
	Who incurred the debt? Check one.	_							
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	■ No	Debts to pension or profit-sharing plans, and other similar debts							
	Yes	■ Other. Specify Medical Services							
4.4	Great Lakes Orthopaedic Center	Last 4 digits of account number 3010	\$526.22						
	Nonpriority Creditor's Name 4045 West Royal Drive Traverse City, MI 49684	When was the debt incurred? 2018							
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	■ Unliquidated							
	Debtor 1 and Debtor 2 only	□ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts							
	☐ Yes	■ Other. Specify Medical Services							
	<b>—</b> 100	Other, Specify Installed Colleges							

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Debto	Susan Elizabeth Randall		Case number (if known)							
4.5	Midland Credit Management	Last 4 digits of account number	7481	\$0.00						
	Nonpriority Creditor's Name 2365 Northside Dr., Suite 300 San Diego, CA 92108	When was the debt incurred?	2016							
	Number Street City State Zip Code	As of the date you file, the claim is	As of the date you file, the claim is: Check all that apply							
	Who incurred the debt? Check one.									
	■ Debtor 1 only	☐ Contingent	☐ Contingent							
	Debtor 2 only	Unliquidated								
	☐ Debtor 1 and Debtor 2 only	☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:							
	☐ Check if this claim is for a community	☐ Student loans								
	debt		ration agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims								
	No	Debts to pension or profit-sharing								
	Yes	Other. Specify notice purp	oses only							
4.6	Munson Healthcare Nonpriority Creditor's Name	Last 4 digits of account number	2557	\$1,675.00						
	MHC Oncology Services 4230 Copper Ridge Dr Bldg E Traverse City, MI 49684	2017								
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply							
	Who incurred the debt? Check one.	,								
	Debtor 1 only	☐ Contingent								
	Debtor 2 only	Unliquidated								
	☐ Debtor 1 and Debtor 2 only	☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured								
	☐ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims								
	■ No	Debts to pension or profit-sharing	plans, and other similar debts							
	Yes	Other. Specify Medical Ser	vices							
4.7	Munson Medical Center	Last 4 digits of account number	8GC1	\$2,818.07						
4.7	Nonpriority Creditor's Name			Ψ2,010.07						
	PO Box 1131	When was the debt incurred?	2017							
	Traverse City, MI 49685-1131	=								
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply							
	Debtor 1 only	☐ Contingent								
		■ Unliquidated								
	Debtor 2 only									
	Debtor 1 and Debtor 2 only	claim:								
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans								
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims	anon agreement or divorce that you did not							
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts							
	☐ Yes	■ Other. Specify Medical Ser	vices							
		- · · · - · · - · · · · · · · · · · · ·								

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Debtor	Susan Elizabeth Randall		Case number (if known)								
4.8	The Center for Plastic Surgery Nonpriority Creditor's Name	Last 4 digits of account number	1626	\$845.06							
	4110 Copper Ridge Drive Ste 242, Bldg D Traverse City, MI 49684	When was the debt incurred?	2016								
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply								
	■ Debtor 1 only	☐ Contingent									
	☐ Debtor 2 only	Unliquidated									
	☐ Debtor 1 and Debtor 2 only	☐ Disputed									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:								
	☐ Check if this claim is for a community	☐ Student loans									
	debt Is the claim subject to offset?										
	No	report as priority claims  Debts to pension or profit-shari	ng plans, and other similar debts								
	Yes	Other. Specify Medical Se									
4.9	Traverse Anesthesia Asso	Last 4 digits of account number	3467	\$2,186.12							
	Nonpriority Creditor's Name 4100 Park Forest Drive Traverse City, MI 49684	When was the debt incurred?	2016								
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply								
	■ Debtor 1 only	☐ Contingent	☐ Contingent  ☐ Unliquidated								
	☐ Debtor 2 only										
	☐ Debtor 1 and Debtor 2 only										
	At least one of the debtors and another	- Charlend In an a									
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not								
	Is the claim subject to offset?	report as priority claims	report as priority claims								
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts								
	Yes	Other. Specify Medical Se	ervices								
is tryinave notific Name a 86th I 280 W Suite	his page only if you have others to be notified ing to collect from you for a debt you owe to somore than one creditor for any of the debts the defor any debts in Parts 1 or 2, do not fill out and Address  District Court  //ashington Street	about your bankruptcy, for a debt that someone else, list the original creditor in lat you listed in Parts 1 or 2, list the add or submit this page.  On which entry in Part 1 or Part 2 did you line 4.7 of (Check one):	n Parts 1 or 2, then list the collection agency itional creditors here. If you do not have add	r here. Similarly, if you litional persons to be							
Cadill	and Address lac Accounts Receivable Wilcox Street		Part 1: Creditors with Priority Unsecured Clair								
РО В	ox 358 lac, MI 49601		Part 2: Creditors with Nonpriority Unsecured	Claims							
		Last 4 digits of account number									
Cadill	and Address lac Accounts Receivable Wilcox Street ox 358		ulist the original creditor? ☐ Part 1: Creditors with Priority Unsecured Clain ☐ Part 2: Creditors with Nonpriority Unsecured								
Cadill	ac, MI 49601	Last 4 digits of account number									
Name a	and Address	On which entry in Part 1 or Part 2 did you Line <b>4.1</b> of ( <i>Check one</i> ):	ulist the original creditor?								

Official Form 106 E/F

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Debtor 1 Susan Elizabeth Randall		Case number (if known)				
PO box 163333 Columbus, OH 43216-3333	Last 4 digits of account number	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims				
Name and Address	On which entry in Part 1 or Part 2 did	· · · · · · ·				
Merchants Association Coll Div	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
424 E. Front STreet P.O. Box 389		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Traverse City, MI 49685-0389	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Merchants Association Coll Div	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
424 E. Front STreet P.O. Box 389		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Traverse City, MI 49685-0389	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				
Velo Law Office	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
Scott Renner 1750 Leonard St		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Grand Rapids, MI 49505	Last 4 digits of account number					

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 16,571.31
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 16,571.31

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Fill in this infor	Fill in this information to identify your case:							
Debtor 1 Susan Elizabeth Randall								
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MICHIGAN					
Case number								
(if known)								

# Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Oak Part Apartments
Chateau Heights
1663 Maylane
Traverse City, MI 49686

State what the contract or lease is for

Lease for apartment

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		•			
Fill in this	s information to identify y	our case:			
Debtor 1	Susan Elizabe	eth Randall			
Dobtor !	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
	3,				
United Sta	ates Bankruptcy Court for the	ne: WESTERN DISTRICT	OF MICHIGAN		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
Sched	dule H: Your C	odebtors			12/15
		own). Answer every questions? (If you are filing a joint case		as a codebtor.	
_					
■ No □ Ye:					
⊔ Ye:	S				
					y states and territories include
Alizoi	na, California, Idano, Louisi	ana, Nevada, New Mexico, F	ruento Rico, Texas, wash	ington, and wisconsin.)	
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former	spouse, or legal equivalent li	ive with you at the time?		
					g with you. List the person shown he creditor on Schedule D (Official
Form	106D), Schedule E/F (Off				Schedule E/F, or Schedule G to fill
out C	column 2.				
	Column 1: Your codebtor Name, Number, Street, City, State a				editor to whom you owe the debt
	Traine, Number, Street, Oity, State of	and ZIF Code		Check all schedule	es that apply:
3.1				Schedule D, lin	e
	Name			☐ Schedule E/F,	
				☐ Schedule G, lin	ne
•	Number Street City	State	ZIP Code		
	City	Sidle	ZIF Code		
22				O Coke adula D. P.	
3.2	Name			_ □ Schedule D, lin □ Schedule E/F,	· · · · · · · · · · · · · · · · · · ·
				☐ Schedule C, lin	
	Number Street			_	
	City	State	ZIP Code		

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Eill	in this information to identify your o	2000:							
		abeth Randall							
		ibetii Nandan			_				
	use, if filing)				-				
Unit	ted States Bankruptcy Court for the	e: WESTERN DISTRICT	Γ OF MICHIGAN		_				
	se number		-						
01	fficial Form 106I					MM / DD/ Y	YYY		
So	chedule I: Your Inc	ome							12/15
sup <sub>l</sub>	s complete and accurate as posplying correct information. If you use. If you are separated and you have separate sheet to this form.  Describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your sith you, do not include	spouse i de infori	s living v nation at	vith you, included in the poor of the poor	ude informat ouse. If more	ion about space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	g spouse	
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	direct care work	cer					
	Include part-time, seasonal, or self-employed work.	Employer's name	Summertree Residential Centers, Inc.			_			
	Occupation may include student or homemaker, if it applies.	Employer's address		210 North Lake St Boyne City, MI 49712					
		How long employed t	here? one yea	ar		<u> </u>			
Par	t 2: Give Details About Mo	nthly Income							
spou	mate monthly income as of the ouse unless you are separated.  u or your non-filing spouse have m		,	•	•			·	J
	e space, attach a separate sheet to		ombine the information	n for all e	mpioyers	for that perso	on the lines	below. If y	you need
					For	Debtor 1	For Debto non-filing		
2.	List monthly gross wages, sale deductions). If not paid monthly,	•		2.	\$	2,219.16	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ne 2 + line 3.		4.	\$	2,219.16	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Susan Elizabeth Randall		_		Case	number (if	known)	_				
	Con	av line 4 hore		4.		For	Debtor 1				Debtor 2 -filing s <sub>l</sub>	oouse	
				4.		Φ_	2,21	9.16	-	Φ		N/A	<u>\</u>
5.	List 5a.	all payroll deductions:  Tax, Medicare, and Social Secur	ity deductions	5a	a	\$	30	3.78		\$		N/A	
	5b.	Mandatory contributions for reti	-	5b		\$_		0.00	-	\$		N/A	_
	5c.	Voluntary contributions for retire		50		\$_		0.00	-	\$		N/A	
	5d.	Required repayments of retireme	ent fund loans	50	d.	\$		0.00	-	\$		N/A	_
	5e.	Insurance		56	€.	\$		0.00	_	\$		N/A	<u>.</u>
	5f.	Domestic support obligations		5f		\$		0.00	-	\$		N/A	<u> </u>
	5g.	Union dues		50		\$_		0.00	_	\$		N/A	_
	5h.	Other deductions. Specify: life		_	Դ.+	\$_		3.30	+	· · —		N/A	_
6.		I the payroll deductions. Add lines	ŭ	6.		\$ _		7.08	-	\$		N/A	_
7.		culate total monthly take-home pay		7.		\$ _	1,82	22.08	-	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b	and from operating a business, ty and business showing gross										
		monthly net income.		88		\$_		0.00	-	\$		N/A	
	8b.	Interest and dividends		8b	).	\$_		0.00	-	\$		N/A	<u>\</u>
	8c.	regularly receive	ou, a non-filing spouse, or a dependent child support, maintenance, divorce t.	: 8c	<b>c</b> .	\$_		0.00		\$		N/A	<u>.</u>
	8d.	Unemployment compensation		80	d.	\$		0.00		\$		N/A	<u> </u>
	8e.	Social Security		86	€.	\$		0.00		\$		N/A	1
	8f.		alue (if known) of any non-cash assistance ones (benefits under the Supplemental	e 8f		\$		0.00		\$		N/A	
	8g.	Pension or retirement income		8g	g.	\$		0.00	-	\$		N/A	
	8h.	Other monthly income. Specify:	Federal and State of MI tax refunds	8h	า.+	\$_	49	9.58	+	\$		N/A	<u>.</u>
9.	Add	l all other income. Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.		\$	49	9.58		\$		N/	A
10.	Calo	culate monthly income. Add line 7 -	⊦ line 9.	10.	\$		2,321.66	s + s			N/A	= \$	2,321.66
		the entries in line 10 for Debtor 1 and			· -		_,					-	
11.	Inclu othe	ude contributions from an unmarried per friends or relatives. not include any amounts already inclu	the expenses that you list in Schedule partner, members of your household, your ded in lines 2-10 or amounts that are not	depe					,		chedule 11.		0.00
12.		e that amount on the Summary of Sc.	ine 10 to the amount in line 11. The res hedules and Statistical Summary of Certa								12.	\$	2,321.66
40	ь-	van avmaat on increase on deer	within the year after year file (1.1- f									month	ly income
13.	□ □	No. Yes. Explain:	e within the year after you file this form	· · ·									

Official Form 106l Schedule I: Your Income page 2

E-111	· () ·	Cara ta idaa Chaasa						
		tion to identify yo	ur case:					
Deb	otor 1	Susan Elizab	eth Ran	dall			eck if this is:	•
Deb	otor 2						An amended fill A supplement s	ing showing postpetition chapter
(Spo	ouse, if filing)					_		s of the following date:
Unit	ed States Bankr	ruptcy Court for the:	WESTE	ERN DISTRICT OF MICH	IGAN		MM / DD / YYY	Υ
	e number							
(If k	nown)							
O	fficial Fo	rm 106J						
		J: Your I	 Exner	1989				12/15
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is nee n). Answer ever	possible eded, atta y questio	. If two married people a ich another sheet to this				e for supplying correct
Par 1.	t 1: Descr Is this a join	ibe Your House	hold					
١.	No. Go to							
		s Debtor 2 live i	n a separ	ate household?				
	□ N		•					
	□ Ye	es. Debtor 2 mus	t file Offici	ial Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			son-disabled		28 yrs	Yes
								□ No □ Yes
								Dres
								☐ Yes
								□ No
								Yes
3.	expenses of	enses include f people other th d your depender	han <sub>—</sub>	No Yes				
	yoursen and	u your depender	ilo:					
Est exp	imate your ex	ate Your Ongoir openses as of you a date after the b	our bankr	uptcy filing date unless	you are using this fo plemental Schedule	orm as a s J, check	supplement in a the to	Chapter 13 case to report p of the form and fill in the
the		n assistance and		government assistance cluded it on Schedule I:			Your e	expenses
, 5.		,						
4.		or home owners and any rent for the		nses for your residence. or lot.	Include first mortgage	4.	\$	577.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	·	0.00
				upkeep expenses		4c.		0.00
5.		owner's associati nortgage payme		dominium dues <b>our residence,</b> such as h	ome equity loans	4d. 5.	·	0.00 0.00
J.	,aitiOilai I	gago payille	y t		onio oquity idalis	٥.	₩	0.00

Debtor	Susan Elizabeth Randall	Case num	ber (if known)	
6. <b>Ut</b>	ilities:			
6a		6a.	\$	110.00
6b	•	6b.	\$	0.00
6c		6c.	\$	260.00
6d		6d.	\$	0.00
	od and housekeeping supplies	<u> </u>	\$	750.00
	ildcare and children's education costs	8.	\$	0.00
_	othing, laundry, and dry cleaning	9.	\$	75.00
	rsonal care products and services	10.	\$	65.00
	edical and dental expenses	11.	\$	
	ansportation. Include gas, maintenance, bus or train fare.	11.	Ψ	80.00
	onot include car payments.	12.	\$	105.00
3. Er	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.66
. Ch	naritable contributions and religious donations	14.	\$	0.00
. Ins	surance.			
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15	a. Life insurance	15a.	\$	0.00
15	b. Health insurance	15b.	\$	0.00
15	c. Vehicle insurance	15c.	\$	109.00
15	d. Other insurance. Specify:	15d.	\$	0.00
. Ta	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:	16.	\$	0.00
	stallment or lease payments:	170	¢	0.00
	a. Car payments for Vehicle 1	17a.	· —	0.00
	b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.	\$	0.00
	d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	her payments you make to support others who do not live with you.	'	\$	0.00
	ecify:	19.	<u> </u>	0.00
	her real property expenses not included in lines 4 or 5 of this form or on Sch		our Income.	
	a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
	e. Homeowner's association or condominium dues	20e.		0.00
		21.	·	10.00
	· · · <u>· · · · · · · · · · · · · · · · </u>		-Ψ	10.00
	Ilculate your monthly expenses			
	a. Add lines 4 through 21.		\$	2,191.66
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,191.66
. Ca	Ilculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,321.66
	b. Copy your monthly expenses from line 22c above.	23b.	·	2,191.66
20	5. Copy you. Monthly expended from the 226 above.	200.	<u> </u>	2,131.00
23	c. Subtract your monthly expenses from your monthly income.			400.00
	The result is your monthly net income.	23c.	\$	130.00
Fo mo	you expect an increase or decrease in your expenses within the year after y rexample, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			or decrease because o
	No.			
1 1	Voc   Explain here.			

Fill	in this information to	identify your	case:				
Del		an Elizabeth F					
Del	First Na	ame	Middle Name	Last Name			
	ouse if, filing) First Na	ame	Middle Name	Last Name			
Uni	ited States Bankruptcy	Court for the:	WESTERN DISTRICT	OF MICHIGAN			
	se number nown)						if this is an ed filing
Of	ficial Form 10	06Sum					
				nd Certain Statistic		-	2/15
info	rmation. Fill out all of	your schedule	es first; then complete t	e are filing together, both ar the information on this form to the box at the top of this	. If you are filing amend		
Par	t 1: Summarize Yo	ur Assets					
						Your as Value of	sets what you own
1.	Schedule A/B: Prop 1a. Copy line 55, Tot	erty (Official Fo al real estate, fr	orm 106A/B) om Schedule A/B			\$	0.00
	1b. Copy line 62, Tot	al personal prop	perty, from Schedule A/B			\$	59,243.58
	1c. Copy line 63, Tot	al of all property	on Schedule A/B			\$	59,243.58
Par	t 2: Summarize Yo	ur Liabilities					
						Your lia	bilities
						Amount	you owe
2.			aims Secured by Propert nn A, Amount of claim, at	y (Official Form 106D) t the bottom of the last page o	f Part 1 of <i>Schedule D</i>	\$	0.00
3.			Unsecured Claims (Official	al Form 106E/F) ms) from line 6e of <i>Schedule E</i>	E/F	\$	0.00
	3b. Copy the total cl	aims from Part 2	2 (nonpriority unsecured	claims) from line 6j of Schedu	le E/F	\$	16,571.31
					Your total liabilities	\$	16,571.31
Par	rt 3: Summarize Yo	ur Income and	Expenses				
4.	Schedule I: Your Inco			le I		\$	2,321.66
5.	Schedule J: Your Ex Copy your monthly e	penses (Official xpenses from li	Form 106J) ne 22c of Schedule J			\$	2,191.66
Par	Answer These	Questions for	Administrative and Sta	tistical Records			
6.			er Chapters 7, 11, or 133 on this part of the form.	? Check this box and submit this	form to the court with yo	ur other sch	edules.
7.	■ Yes What kind of debt d	o you have?					
				debts are those "incurred by a 9g for statistical purposes. 28		a personal,	family, or
	Your debts are			ave nothing to report on this pa	art of the form. Check this	s <i>box</i> and su	bmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Susan Elizabeth Randall

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,219.16

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	n
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this information to it	dentify your case:		
First Name	e Elizabeth Randall  Middle Name	Last Name	
Debtor 2			
(Spouse if, filing) First Name	e Middle Name	Last Name	
United States Bankruptcy Co	ourt for the: WESTERN DISTRIC	T OF MICHIGAN	
Case number (if known)			☐ Check if this is an
			amended filing
Official Form 106De			
<b>Declaration A</b>	bout an Individua	al Debtor's Sched	lules 12/15
		inkrupicy case can result in fines	up to \$250,000, or imprisonment for up to 20
years, or both. 18 U.S.C. §§	3 152, 1341, 1519, and 3571.	mkruptcy case can result in lines	up to \$250,000, or imprisonment for up to 20
Sign Below			
Sign Below	3 152, 1341, 1519, and 3571.		
Sign Below  Did you pay or agree	3 152, 1341, 1519, and 3571.  to pay someone who is NOT an att		
Sign Below  Did you pay or agree  No  Yes. Name of per	to pay someone who is NOT an att	torney to help you fill out bankrup	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Sign Below  Did you pay or agree  No  Yes. Name of per  Under penalty of perjuthat they are true and	to pay someone who is NOT an att	corney to help you fill out bankrup	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Sign Below  Did you pay or agree  No Yes. Name of periods.	to pay someone who is NOT an atterson  Iry, I declare that I have read the sucorrect.  Seth Randall  Randall	torney to help you fill out bankrup	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Fill in this inform	nation to identify your case:
Debtor 1	Susan Elizabeth Randall
Debtor 2 (Spouse, if filing)	
United States B	Sankruptcy Court for the: Western District of Michigan
Case number (if known)	

Check	Check as directed in lines 17 and 21:					
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

auu	monar pages, write your mame and case mamber (ii i	KIIOWII).						
Pai	rt 1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
1 t	Fill in the average monthly income that you received from a 101(10A). For example, if you are filing on September 15, the 6-he 6 months, add the income for all 6 months and divide the totspouses own the same rental property, put the income from that	month per al by 6. Fil	riod would Il in the re	be March 1 throusult. Do not include	ugh August 31 de any income	. If the ame amount m	ount of your monthly income value than once. For example, if	ied during
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$	219.16	\$	
3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spor you listed on line 3.	r <b>t.</b> Includ ld, your o	e regulai depende	r contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	-\$_	0.00					
	Net monthly income from a business, profession, or fa	arm \$ _	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

				Column Debtor 1		Column B Debtor 2 o	or	
7	Inte	rest, dividends, and royalties		\$	0.00	\$	•	
		employment compensation		\$	0.00	\$		
		not enter the amount if you contend that the amount received was a ber Social Security Act. Instead, list it here:	nefit unde	r				
			0.00					
		or your spouse \$						
9.	Pen bene	sion or retirement income. Do not include any amount received that we fit under the Social Security Act.	was a	\$	0.00	\$		
10.	Do r rece dom	ome from all other sources not listed above. Specify the source and not include any benefits received under the Social Security Act or paymeived as a victim of a war crime, a crime against humanity, or internation testic terrorism. If necessary, list other sources on a separate page and below.	ents nal or					
				\$	0.00	\$		
				\$	0.00	\$		
		Total amounts from separate pages, if any.	+	. \$	0.00	\$		
11.		culate your total average monthly income. Add lines 2 through 10 for n column. Then add the total for Column A to the total for Column B.	\$	2,219.16	+ \$		= \$	2,219.16
Part		Determine How to Measure Your Deductions from Income						al average nthly income
12.	Cop	y your total average monthly income from line 11.					\$	2,219.16
13.	Cop	culate the marital adjustment. Check one:					\$	2,219.16
13.	Calc	culate the marital adjustment. Check one:  You are not married. Fill in 0 below.					\$	2,219.16
13.	Cald  □	culate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below.					\$	2,219.16
13.	Calc	culate the marital adjustment. Check one:  You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N	IOT regul:	arly paid for	r the housel	nold expense	s of you o	r your
13.	Cald  □	culate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you.	IOT regula se's suppo	arly paid for	r the housel one other th	nold expense an you or you	es of you of ur depende	r your ents.
13.	Cald  □	You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spouse Below, specify the basis for excluding this income and the amount of income and income	IOT regula se's suppo	arly paid for	r the housel one other th	nold expense an you or you	es of you of ur depende	r your ents.
13.	Cald  □	You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.	IOT regula se's suppo	arly paid for	r the housel one other th	nold expense an you or you	es of you of ur depende	r your ents.
13.	Cald  □	You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.	IOT regulate's supposers of the supposer	arly paid for	r the housel one other th	nold expense an you or you	es of you of ur depende	r your ents.
13.	Cald  □	You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.	IOT regula e's suppo ncome de	arly paid for	r the housel one other th	nold expense an you or you	es of you of ur depende	r your ents.
13.	Cald  □	You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.	IOT regulate's supposers of the supposer	arly paid for ort of somecevoted to ea	r the housel one other th ach purpose	nold expense an you or you	es of you of ur depende	r your ents.
13.	Calc	You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of in adjustments on a separate page.  If this adjustment does not apply, enter 0 below.	IOT regulates supposed in the	arly paid for ort of somecevoted to ea	r the housel one other th ach purpose	nold expense an you or you . If necessary	es of you of ur depende	r your ents. ional
13.	Calc	You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of i adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  Total	IOT regulate's support of the suppor	arly paid for ort of somecevoted to ea	r the housel one other th ach purpose	nold expense an you or you . If necessary	s of you of ur depender, list addit	0.00 2,219.16
13.	Yo Ca	You are not married. Fill in 0 below.  You are married and your spouse is filing with you. Fill in 0 below.  You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of i adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  Total  Total  ur current monthly income. Subtract line 13 from line 12.	IOT regulates support of the support	arly paid for ort of some cevoted to ea	r the housel one other th ach purpose	nold expense an you or you . If necessary py here=>	s of you of ur depender, list addit	r your ents. ional
13.	Yo Ca	You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was N dependents, such as payment of the spouse's tax liability or the spous Below, specify the basis for excluding this income and the amount of it adjustments on a separate page.  If this adjustment does not apply, enter 0 below.  Total  Total  It current monthly income. Subtract line 13 from line 12.	IOT regulates support of the support	arly paid for ort of some cevoted to ea	r the housel one other th ach purpose	nold expense an you or you . If necessary py here=>	s of you of ur depender, list addit	0.00 2,219.16

Susan Elizabeth Randall

Debtor 1

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Debte	or 1	Susa	ın Elizabeth Randall			Case number (if known)		
16	. Cal	culate t	the median family income that applies to y	<b>/ou.</b> Follo	w these steps	:		
			the state in which you live.	N				
	16b	. Fill in	the number of people in your household.		2			
	16c		the median family income for your state and and a list of applicable median income amounts			k specified in the separate	\$_	62,618.00
			ctions for this form. This list may also be avai					
17	. Hov	v do th	e lines compare?					
	17a	. •	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N					
	17b	. 🗆	Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	ulation of				
Par	t 3:	Cald	culate Your Commitment Period Under 11	U.S.C. § 1	325(b)(4)			
18.	Cop	y your	total average monthly income from line 1	1.			\$	2,219.16
19.	con	tend tha	e marital adjustment if it applies. If you are at calculating the commitment period under 1 acome, copy the amount from line 13.					
	19a	. If the	marital adjustment does not apply, fill in 0 on	line 19a.			<b>-</b> \$	0.00
	19b	. Subtr	act line 19a from line 18.				\$	2,219.16
20.	Cal	culate	your current monthly income for the year.	Follow th	ese steps:			
	20a	. Сору	line 19b				\$_	2,219.16
		Multip	bly by 12 (the number of months in a year).					12
	20b	. The re	esult is your current monthly income for the ye	ear for this	s part of the fo	orm	\$_	26,629.92
	20c	. Сору	the median family income for your state and	size of ho	usehold from	line 16c	\$_	62,618.00
	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwi	se ordere	hy the court	on the top of page 1 of this form, ch	eck hov 3	The commitment
			period is 3 years. Go to Part 4.	se ordered	a by the court	, on the top of page 1 of this form, on	eck box 3,	The Communication
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless other	wise ordered	by the court, on the top of page 1 of	this form, ch	neck box 4, The
Par	t 4:	Sigi	n Below					
	By s	signing	here, under penalty of perjury I declare that t	he informa	ation on this s	tatement and in any attachments is t	rue and cor	ect.
>	( Isl	' Susa	n Elizabeth Randall					
,	Sı	ısan E	lizabeth Randall					
	•		of Debtor 1					
	Date		vtember 19, 2019 / DD / YYYY					
	If yo		ked 17a, do NOT fill out or file Form 122C-2.					
	If yo	u chec	ked 17b, fill out Form 122C-2 and file it with t	this form.	On line 39 of t	hat form, copy your current monthly	income from	line 14 above.

Case:19-03958-jwb Doc #:1 Filed: 09/19/2019 Page 44 of 46

# United States Bankruptcy Court Western District of Michigan

In re Susan Elizabeth Randall	Debtor(s)	Case No. Chapter	13					
VERIFICATION OF CREDITOR MATRIX								
he above-named Debtor hereby verifies th	at the attached list of creditors is true and	correct to the best	of his/her knowledge.					
Date: September 19, 2019	/s/ Susan Elizabeth Randall							

Signature of Debtor

86TH DISTRICT COURT 280 WASHINGTON STREET SUITE 114C TRAVERSE CITY MI 49684

BEAUMONT HOSPITAL 28050 GRAND RIVER AVE FARMINGTON MI 48336

CADILLAC ACCOUNTS RECEIVABLE 1015 WILCOX STREET PO BOX 358 CADILLAC MI 49601

CBCS
PO BOX 163333
COLUMBUS OH 43216-3333

CHRYSLER CAPITAL
ATTN: BANKRUPTCY DEPT
PO BOX 961278
FORT WORTH TX 76161-1278

GRAND TRAVERSE PATHOLOGY 1105 6TH STREET TRAVERSE CITY MI 49684

GREAT LAKES ORTHOPAEDIC CENTER 4045 WEST ROYAL DRIVE TRAVERSE CITY MI 49684

MERCHANTS ASSOCIATION COLL DIV 424 E. FRONT STREET P.O. BOX 389 TRAVERSE CITY MI 49685-0389

MIDLAND CREDIT MANAGEMENT 2365 NORTHSIDE DR., SUITE 300 SAN DIEGO CA 92108

MUNSON HEALTHCARE
MHC ONCOLOGY SERVICES
4230 COPPER RIDGE DR BLDG E
TRAVERSE CITY MI 49684

MUNSON MEDICAL CENTER PO BOX 1131 TRAVERSE CITY MI 49685-1131

OAK PART APARTMENTS CHATEAU HEIGHTS 1663 MAYLANE TRAVERSE CITY MI 49686

THE CENTER FOR PLASTIC SURGERY 4110 COPPER RIDGE DRIVE STE 242, BLDG D
TRAVERSE CITY MI 49684

TRAVERSE ANESTHESIA ASSO 4100 PARK FOREST DRIVE TRAVERSE CITY MI 49684

VELO LAW OFFICE SCOTT RENNER 1750 LEONARD ST GRAND RAPIDS MI 49505